



FORM
GD1
(Rev. 5/2012)



HAWAII STATE ETHICS COMMISSION GIFTS DISCLOSURE STATEMENT

(This report covers the period from June 1 of the preceding calendar year through June 1 of this year and is due by June 30)

STATE OF HAWAII
STATE ETHICS COMMISSION

12 DEC 13 PM 2:58

FILER

Morikawa

Daynette

Last Name

First Name

M.I.

Legislature - House of Representatives

Representative - District 16

State Agency

State Position

CONTACT INFORMATION

Hawai'i State Capitol, Rm. 310

415 South Beretania Street

Number and Street or P.O. Box

Honolulu

HI

96813

City

State

Zip Code

(808) 586-6280

repmorikawa@capitol.hawaii.gov

Telephone

Extension

Email Address

GIFT INFORMATION (LIST EACH GIFT SEPARATELY)

- Donor: Council of State Governments (CSG) Date Received: 10/29/2012
Gift (Description): Airfare to attend Health Policy Academy in D.C. Value/Cost: \$1651.58
- Donor: Council of State Governments (CSG) Date Received: 11/14/2012
Gift (Description): D.C. Hotel cost for CSG Acedemy- 11/14/12-11/17/12 Value/Cost: \$451.95
- Donor: _____ Date Received: _____
Gift (Description): _____ Value/Cost: _____
- Donor: _____ Date Received: _____
Gift (Description): _____ Value/Cost: _____
- Donor: _____ Date Received: _____
Gift (Description): _____ Value/Cost: _____

☐ Check here if additional sheets are attached

CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement.

Signature

Date

12/10/2012